

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

INFORMATION DISCLOSURE STATEMENT

Docket Number
10124/01603

Application No.
To be assigned

Filing Date
Herewith

Inventor(s)
Barry N. Gellman et al.

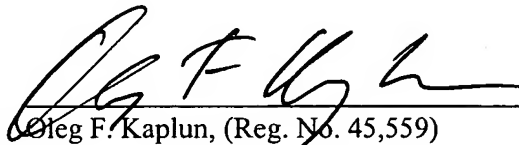
Invention Title
Cervical Tenaculum

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. In accordance with the duty of disclosure under 37 C.F.R. § 1.56 and in conformance with the procedures of 37 C.F.R. §§ 1.97 and 1.98 and M.P.E.P. § 609, attorneys for Applicant hereby brings the following references to the attention of the Examiner. The references are listed on the attached modified PTO Form No. 1449. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.
2. A copy of each patent, publication or other information listed on the modified PTO form 1449 are enclosed herewith.
3. By submitting this Information Disclosure Statement, the Applicants make no representation that a search has been performed, of the extent of any search performed, or that more relevant information does not exist.
4. By submitting this Information Disclosure Statement, the Applicants make no representation that the information cited in the Statement is, or is considered to be, material to patentability as defined in 37 C.F.R. §1.56(b).
5. By submitting this Information Disclosure Statement, the Applicants make no representation that the information cited in the Statement is, or is considered to be, in fact, prior art as defined by 35 U.S.C. § 102.

Dated: January 21, 2004

By:



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INFORMATION DISCLOSURE STATEMENT BY APPLICANT FORM PTO-1449	ATTY. DOCKET NO. 10124/01603	APPLICATION NO. To be assigned
	INVENTOR(S) Barry N. Gellman et al.	
	FILING DATE Herewith	

U. S. PATENT DOCUMENTS

EXAMINER INITIAL	PATENT NUMBER	PATENT DATE	NAME	CLASS	SUBCLASS	FILING DATE
	5,980,534	November 9, 1999	Gimpelson			

FOREIGN PATENT DOCUMENTS

EXAMINER INITIAL	DOCUMENT NUMBER	DATE (M/D/Y)	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
						YES	NO

OTHER DOCUMENTS

EXAMINER INITIAL		AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.

EXAMINER	DATE CONSIDERED
EXAMINER: Initial if citation considered, whether or not citation is in conformance with M.P.E.P. 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.	